

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR QUALITY
FIELD INSPECTION REPORT**



| SOURCE INFORMATION | |
|---------------------------|---|
| <u>SOURCE NAME</u> | Brinly-Hardy Company |
| <u>SOURCE LOCATION</u> | 3230 Industrial Parkway Jeffersonville, Indiana 47130 Clark County |
| <u>MAILING ADDRESS</u> | 3230 Industrial Parkway Jeffersonville, Indiana 47130 |
| <u>PLANT ID</u> | 019-00098 |
| <u>PERMIT INFORMATION</u> | Permit Type: MSOP Permit Number: 39507 Permit Expiration Date: 08/08/2026 VFC Document No.(hyperlink): 80604097 |
| <u>ATTAINMENT STATUS</u> | <input checked="" type="checkbox"/> Attainment for all criteria pollutants <input type="checkbox"/> Nonattainment for <input type="checkbox"/> SO ₂ <input type="checkbox"/> CO <input type="checkbox"/> O ₃ <input type="checkbox"/> NO ₂ <input type="checkbox"/> Pb <input type="checkbox"/> PM ₁₀ <input type="checkbox"/> PM _{2.5} |
| <u>SOURCE STATUS</u> | <input type="checkbox"/> PSD Major (326 IAC 2-2) <input type="checkbox"/> Major Source of HAPs <input type="checkbox"/> Emission Offset (326 IAC 2-3) <input checked="" type="checkbox"/> Area Source of HAPs <input type="checkbox"/> Acid Rain (326 IAC 21) |
| <u>SOURCE DESCRIPTION</u> | Brinly-Hardy Company owns and operates a stationary lawn and garden equipment manufacturing operation. The source operates one shift, Monday through Friday and employs approximately 100 employees. |

| INSPECTION INFORMATION | | | | | |
|-----------------------------------|--|-------------------------|--|--|--|
| <u>INSPECTED BY</u> | Susan Raisor | | | | |
| <u>INSPECTION DATE AND TIME</u> | 12/08/2020 | TIME IN: 8:10 a.m. | TIME OUT: 9:30 a.m. | | |
| <u>REPORTED BY</u> | Susan Raisor <i>MHY</i> 12/14/2020 | REPORT DATE: 12/08/2020 | | | |
| <u>COMPLIANCE PERIOD REVIEWED</u> | 11/02/2017 to 12/08/2020 | | | | |
| <u>INSPECTION NOTIFICATION</u> | <input type="checkbox"/> Unannounced <input checked="" type="checkbox"/> Announced: Due to Covid-19, inspection was announced to determine operational status and additional PPE requirements. | | | | |
| <u>INSPECTION OBJECTIVE(S)</u> | <input type="checkbox"/> Compliance Monitoring Strategy (CMS) | | <input checked="" type="checkbox"/> Commitment | | |
| | <input type="checkbox"/> Mega-Site: <input type="checkbox"/> FCE <input type="checkbox"/> PCE | | <input type="checkbox"/> Complaint | | |
| | <input type="checkbox"/> Other: | | <input type="checkbox"/> Surveillance | | |
| <u>ACES TRACKING NUMBER(S)</u> | Inspection: 253030 | Complaint: N/A | Violation/Warning: 253031 | | |
| <u>RM TRACKING NUMBER(S)</u> | Complaint: N/A | | | | |
| <u>INSPECTION BACKGROUND</u> | Routine commitment inspection | | | | |

| SOURCE PERSONNEL INTERVIEWED | | | |
|-------------------------------------|---------------------------|--------------|--|
| Name | Title | Phone Number | Email Address |
| Samuel Stillwell | Industrial Engineer | 502-759-0292 | sstillwell@brinly.com |
| Scott Regan | Critical Systems Engineer | 812-218-7232 | sregan@brinly.com |

| INSPECTION AND COMPLAINT HISTORY (PREVIOUS 5 YEARS) | | | |
|--|---------------------------|---------------------|----------|
| Date | Inspection/Complaint Type | Result | Comments |
| 11/02/2017 | Commitment | No Violations Noted | |

| COMPLIANCE HISTORY (PREVIOUS 5 YEARS) | | | |
|--|-------------------------|-----------------------|-----------------------|
| Informal Enforcement Actions | | | |
| Date Issued | Action Taken | Describe Violation(s) | |
| N/A | SELECT ACTION TAKEN | | |
| Formal Enforcement Actions | | | |
| Case Number | Enforcement Type | Civil Penalty | Describe Violation(s) |
| N/A | SELECT ENFORCEMENT TYPE | \$ | |
| Other Relevant Actions | | | |
| Action Taken | Comments | | |
| N/A | | | |

| PERMIT SECTION D.1 | | | |
|--|---|---|---|
| Emission Units and Control Devices: | | | |
| <ul style="list-style-type: none"> Two (2) powder coating application booths (PC-A and PC-B) | | | |
| Pollutants with Emission Limits or Applicable Standards: | | | |
| <input type="checkbox"/> SO ₂ <input type="checkbox"/> NO _x <input type="checkbox"/> CO <input type="checkbox"/> VOC <input checked="" type="checkbox"/> PM <input checked="" type="checkbox"/> PM ₁₀ <input checked="" type="checkbox"/> PM _{2.5} <input type="checkbox"/> HAPS | | | |
| Applicable Rules: | | | |
| <ul style="list-style-type: none"> 326 IAC 6.5-1-2 | | | |
| Requirement: | Applicable | Violation Noted | |
| Emission Limitations and Standards | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Preventive Maintenance Plan | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Compliance Determination Requirements | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Testing Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Compliance Monitoring Requirements | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Recordkeeping Requirements | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Types of Records Reviewed: Cyclone and filter semi-annual inspections | | | |
| Reporting Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Observations and Comments: | | | |
| The powder coating application booths were not in operation at the time of the inspection. Filters were in place and appeared to be in good condition. | | | |
| Emission Unit or Control Device | Parameter | Permitted Value/Range | Observed |
| Cyclone and Dry Filters | | | Filters are in place and used when coating application booths are operated. |

| PERMIT SECTION D.1 | |
|--|-----------------|
| Permit Section Compliance Status: | |
| <input checked="" type="checkbox"/> No violations were observed or determined for this permit section at the time of the inspection. <input type="checkbox"/> The following violations were determined for this permit section at the time of the inspection: | |
| <i>Condition/Citation</i> | <i>Comments</i> |
| N/A | |

| PERMIT SECTION D.2 | | | |
|---|---|---|-----------------|
| Emission Units and Control Devices: | | | |
| <ul style="list-style-type: none"> • Robot Room: Two (2) manual MIG welding stations; Two (2) robotic MIG welding stations; • Ride On Area: Two (2) manual MIG welding stations; • Power Tach Area: Five (5) manual MIG welding stations; • S, P, Q, D, C Area: Two (2) manual MIG welding stations; • Research and Development: Four (4) manual MIG welding station; One (1) pedestal grinder; One (1) plasma cutter; Two (2) manual oxyacetylene cutting torches; one (1) tool and die bead blaster; one (1) plow grinding and polishing operation; • Drill Area: One (1) pedestal grinder; • Near 1203 and 1204: One (1) pedestal grinder; and, • Two (2) laser cutters. | | | |
| Pollutants with Emission Limits or Applicable Standards: | | | |
| <input type="checkbox"/> SO ₂ <input type="checkbox"/> NO _x <input type="checkbox"/> CO <input type="checkbox"/> VOC <input checked="" type="checkbox"/> PM <input checked="" type="checkbox"/> PM ₁₀ <input checked="" type="checkbox"/> PM _{2.5} <input type="checkbox"/> HAPS | | | |
| Applicable Rules: | | | |
| <ul style="list-style-type: none"> • 326 IAC 6.5-1-2 | | | |
| Requirement: | Applicable | Violation Noted | |
| Emission Limitations and Standards | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Preventive Maintenance Plan | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Compliance Determination Requirements | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Testing Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Compliance Monitoring Requirements | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Recordkeeping Requirements | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Types of Records Reviewed: Bead blaster semi-annual inspections | | | |
| Reporting Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Observations and Comments: | | | |
| At the time of the inspection, all equipment was in use except for the bead blaster, which is located in the Tool and Die Area. Mr. Regan stated the bead blaster is seldom used and approximated it was used only an average of two (2) or three (3) times per month. | | | |
| <i>Emission Unit or Control Device</i> | <i>Parameter</i> | <i>Permitted Value/Range</i> | <i>Observed</i> |
| N/A | | | |
| Permit Section Compliance Status: | | | |
| <input type="checkbox"/> No violations were observed or determined for this permit section at the time of the inspection. <input checked="" type="checkbox"/> The following violations were determined for this permit section at the time of the inspection: | | | |
| <i>Condition/Citation</i> | <i>Comments</i> | | |
| D.2.4 | The source failed to perform semi-annual inspections of the dust bag from the bead blaster. | | |
| D.2.5 | The source failed to maintain records of the semi-annual inspections of the dust bag from the bead blaster. | | |

| PERMIT SECTION D.3 | | | |
|---|---|---|-----------------|
| <u>Emission Units and Control Devices:</u> | | | |
| <ul style="list-style-type: none"> • Natural gas fired units including: boiler; drying oven; curing oven; cleaning furnace; heat treating furnace; furnaces; and, Cozy Systems testing lines. | | | |
| <u>Pollutants with Emission Limits or Applicable Standards:</u> | | | |
| <input checked="" type="checkbox"/> SO ₂ <input checked="" type="checkbox"/> NO _x <input checked="" type="checkbox"/> CO <input checked="" type="checkbox"/> VOC <input checked="" type="checkbox"/> PM <input checked="" type="checkbox"/> PM ₁₀ <input checked="" type="checkbox"/> PM _{2.5} <input checked="" type="checkbox"/> HAPS | | | |
| <u>Applicable Rules:</u> | | | |
| <ul style="list-style-type: none"> • 326 IAC 6.5-1-2 | | | |
| <u>Requirement:</u> | | | |
| Emission Limitations and Standards | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Preventive Maintenance Plan | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Compliance Determination Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Testing Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Compliance Monitoring Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Recordkeeping Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| <u>Types of Records Reviewed:</u> | | | |
| Reporting Requirements | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| <u>Observations and Comments:</u> | | | |
| At the time of the inspection, all listed natural gas units were in operation except for the drying oven and curing oven. There were no visible emissions observed during the inspection. | | | |
| <i>Emission Unit or Control Device</i> | <i>Parameter</i> | <i>Permitted Value/Range</i> | <i>Observed</i> |
| N/A | | | |
| <u>Permit Section Compliance Status:</u> | | | |
| <input checked="" type="checkbox"/> No violations were observed or determined for this permit section at the time of the inspection. | | | |
| <input type="checkbox"/> The following violations were determined for this permit section at the time of the inspection: | | | |
| <i>Condition/Citation</i> | <i>Comments</i> | | |
| N/A | | | |

| ADDITIONAL SOURCE COMPLIANCE REVIEW: | |
|--|--|
| The following reports are required and were reviewed: | |
| <input type="checkbox"/> Annual Compliance Certification(s) | <input type="checkbox"/> Deviation & Compliance Monitoring Report(s) |
| <input checked="" type="checkbox"/> Annual Notification(s) | <input type="checkbox"/> Emission Statement(s) |
| The reports are consistent with inspection observations. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| The permit accurately represents emission units observed on site. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| Compliance assistance was provided during the inspection. | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| The source is required to have a Risk Management Plan [40 CFR 68]. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| If yes, the source has a plan. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |
| If yes, the employees have been trained. | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |
| <u>Additional Information and Comments:</u> | |
| N/A | |
| <u>Additional Source Compliance Review Status:</u> | |

ADDITIONAL SOURCE COMPLIANCE REVIEW:

- No violations were observed or determined at the time of the inspection.
- The following violations were determined at the time of the inspection:

| <i>Condition/Citation</i> | <i>Description of Violation(s)</i> |
|---------------------------|------------------------------------|
| N/A | |

INSPECTION FINDINGS

- No violations were observed or determined at the time of the inspection.
- The following violations were determined at the time of the inspection:

| <i>Condition/Citation</i> | <i>Description of Violation(s)</i> |
|---------------------------|--|
| D.2.4 | The source failed to perform semi-annual inspections of the dust bag from the bead blaster. |
| D.2.5 | The source failed to maintain records of the semi-annual inspections of the dust bag from the bead blaster |

RECOMMENDED ACTION Issue inspection summary/violation letter.

EXIT INTERVIEW I explained my findings, recommendations, and conclusions with Mr. Stillwell and Mr. Regan prior to exiting the facility.

ATTACHMENTS

- N/A